

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

COMMON SENSE LEADERSHIP FOR AMERICA

ADDRESS (number and street)

601 PENNSYLVANIA AVE NW

NORTH BUILDING, SUITE 1000

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00615930

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

DATWYLER, THOMAS, , ,

Type or Print Name of Treasurer

Signature of Treasurer

DATWYLER, THOMAS, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

COMMON SENSE LEADERSHIP FOR AMERICA

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	226219.00	
(c) Total Receipts (from Line 19) .....	0.00	426500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	226219.00	426500.00
7. Total Disbursements (from Line 31).....	211175.78	411456.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	15043.22	15043.22
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**COMMON SENSE LEADERSHIP FOR AMERICA**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

<b>I. Receipts</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	426500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	426500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	426500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	0.00	426500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	426500.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	39394.78	179412.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	39394.78	179412.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	171781.00	232044.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	211175.78	411456.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	211175.78	411456.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	426500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	426500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	39394.78	179412.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	39394.78	179412.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**COMMON SENSE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. ABACUS GROUP**Mailing Address 611 PENNSYLVANIA AVE SE  
#267City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	1			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.4174**

Amount of Each Disbursement this Period

 3279.85☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ABACUS GROUP**Mailing Address 611 PENNSYLVANIA AVE SE  
#267City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.4237**

Amount of Each Disbursement this Period

 5888.19☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.4218**

Amount of Each Disbursement this Period

 20.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 9188.04

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COMMON SENSE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. CLANCY COMMUNICATIONS, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2016

Mailing Address 384 ATLANTIC AVE  
APT. 4ACity  
BROOKLYNState  
NYZip Code  
11217Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.4232

Amount of Each Disbursement this Period

8400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLARK HILL, PLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2016

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 1000City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.4235

Amount of Each Disbursement this Period

3543.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIMYLAN ENTERPRISES, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2016

Mailing Address PO BOX 540  
TIMES SQUARE STATIONCity  
NEW YORKState  
NYZip Code  
10108Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.4234

Amount of Each Disbursement this Period

3029.62

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

14972.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COMMON SENSE LEADERSHIP FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. RIMYLAN ENTERPRISES, LLC**

Mailing Address PO BOX 540

TIMES SQUARE STATION

City  
NEW YORKState  
NYZip Code  
10108Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		27		2016

FEC Identification Number

**C****Transaction ID : SB21B.4231**

Amount of Each Disbursement this Period

12500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIMYLAN ENTERPRISES, LLC**

Mailing Address PO BOX 540

TIMES SQUARE STATION

City  
NEW YORKState  
NYZip Code  
10108Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		29		2016

FEC Identification Number

**C****Transaction ID : SB21B.4236**

Amount of Each Disbursement this Period

2574.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15074.12

39234.78



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 9 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00615930         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>AMHC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>500 SANSOME STREET SUITE 404</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">20032.00</div>	
City <b>SAN FRANCISCO</b>		State <b>CA</b>		Zip Code <b>94111</b>	
Purpose of Expenditure <b>PRINTING/POSTAGE</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>RANDOLPH, SUSANNAH, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>09</b> State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">142795.00</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>AMHC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>500 SANSOME STREET SUITE 404</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">17157.00</div>	
City <b>SAN FRANCISCO</b>		State <b>CA</b>		Zip Code <b>94111</b>	
Purpose of Expenditure <b>PRINTING/POSTAGE</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>RANDOLPH, SUSANNAH, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>09</b> State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">159952.00</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">37189.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>DATWYLER, THOMAS, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 10 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00615930       </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>AMHC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 19 / 2016							
Mailing Address 500 SANSOME STREET SUITE 404				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7339.00</div>							
City SAN FRANCISCO		State CA		Zip Code 94111							
Purpose of Expenditure PRINTING/POSTAGE				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: GRAYSON, DENA MD, PHD, , ,				Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">167291.00</span>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item <b>AMHC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 22 / 2016							
Mailing Address 500 SANSOME STREET SUITE 404				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">13753.00</div>							
City SAN FRANCISCO		State CA		Zip Code 94111							
Purpose of Expenditure PRINTING/POSTAGE				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: RANDOLPH, SUSANNAH, , ,				Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">181044.00</span>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">21092.00</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">21092.00</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">21092.00</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
DATWYLER, THOMAS, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 15 / 2016							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 11 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00615930         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <b>AMHC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 500 SANSOME STREET SUITE 404			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           13000.00         </div>		
City SAN FRANCISCO		State CA	Zip Code 94111		<b>Transaction ID : SE.4219</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		004	
Name of Federal Candidate: RANDOLPH, SUSANNAH, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>RIMYLAN ENTERPRISES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address PO BOX 540 TIMES SQUARE STATION			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           4666.67         </div>		
City NEW YORK		State NY	Zip Code 10108		<b>Transaction ID : SE.4222</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type		004	
Name of Federal Candidate: SOTO, DARREN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           17666.67         </div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           0.00         </div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           17666.67         </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
DATWYLER, THOMAS, , , Signature			[Electronically Filed]		
			Date		
			<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 12 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00615930</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>RIMYLAN ENTERPRISES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address <b>PO BOX 540 TIMES SQUARE STATION</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4666.67</div>		
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10108</b>	<b>Transaction ID : SE.4223</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>MESSAGE PHONE CALLS</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>GRAYSON, DENA MD, PHD, , ,</b>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">227377.34</div>	Office Sought: <input checked="" type="checkbox"/> House    District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>RIMYLAN ENTERPRISES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address <b>PO BOX 540 TIMES SQUARE STATION</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4666.66</div>		
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10108</b>	<b>Transaction ID : SE.4224</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>MESSAGE PHONE CALLS</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>RANDOLPH, SUSANNAH, , ,</b>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">232044.00</div>	Office Sought: <input checked="" type="checkbox"/> House    District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">9333.33</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>DATWYLER, THOMAS, , ,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00615930 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>RISING TIDE INTERACTIVE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1250 H STREET NW SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25750.00</div>		
City WASHINGTON	State DC	Zip Code 20005	<b>Transaction ID : SE.4142</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure MEDIA PLACEMENT		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose GRAYSON, DENA MD, PHD, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">86013.00</div>	Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>RISING TIDE INTERACTIVE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1250 H STREET NW SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5500.00</div>		
City WASHINGTON	State DC	Zip Code 20005	<b>Transaction ID : SE.4153</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure MEDIA PRODUCTION		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose GRAYSON, DENA MD, PHD, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">91513.00</div>	Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">31250.00</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
DATWYLER, THOMAS, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 14 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00615930         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report      Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>RISING TIDE INTERACTIVE</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            08 / 11 / 2016         </div>		
Mailing Address 1250 H STREET NW SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           25750.00         </div>		
City WASHINGTON	State DC	Zip Code 20005	<b>Transaction ID : SE.4154</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            08 / 11 / 2016         </div>		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: SOTO, DARREN, ,			<input checked="" type="checkbox"/> Support      Office Sought: <input checked="" type="checkbox"/> House      District: 09 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">117263.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>RISING TIDE INTERACTIVE</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            08 / 11 / 2016         </div>		
Mailing Address 1250 H STREET NW SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           5500.00         </div>		
City WASHINGTON	State DC	Zip Code 20005	<b>Transaction ID : SE.4155</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            08 / 11 / 2016         </div>		
Purpose of Expenditure MEDIA PRODUCTION		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: SOTO, DARREN, ,			<input checked="" type="checkbox"/> Support      Office Sought: <input checked="" type="checkbox"/> House      District: 09 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">122763.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         31250.00       </div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         31250.00       </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
DATWYLER, THOMAS, , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</span> 10 / 15 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00615930 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>RISING TIDE INTERACTIVE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1250 H STREET NW SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8500.00</div>		
City WASHINGTON	State DC	Zip Code 20005	<b>Transaction ID : SE.4190</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose RANDOLPH, SUSANNAH, , ,		
Name of Federal Candidate: RANDOLPH, SUSANNAH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">189544.00</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>RISING TIDE INTERACTIVE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1250 H STREET NW SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1500.00</div>		
City WASHINGTON	State DC	Zip Code 20005	<b>Transaction ID : SE.4191</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure MEDIA PRODUCTION		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose RANDOLPH, SUSANNAH, , ,		
Name of Federal Candidate: RANDOLPH, SUSANNAH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">191044.00</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
DATWYLER, THOMAS, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>COMMON SENSE LEADERSHIP FOR AMERICA</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00615930         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>RISING TIDE INTERACTIVE</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Mailing Address    1250 H STREET NW SUITE 200				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3000.00</div>	
City WASHINGTON		State DC		Zip Code 20005	
Purpose of Expenditure MEDIA PLACEMENT				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: RANDOLPH, SUSANNAH, , ,				Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">203044.00</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>RISING TIDE INTERACTIVE</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Mailing Address    1250 H STREET NW SUITE 200				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2000.00</div>	
City WASHINGTON		State DC		Zip Code 20005	
Purpose of Expenditure MEDIA PRODUCTION				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: RANDOLPH, SUSANNAH, , ,				Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">205044.00</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">5000.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
DATWYLER, THOMAS, , , <span style="float: right;">[Electronically Filed]</span> Signature				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	



FEC Schedule E (Form 3X) Rev. 05/2016